



# ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the professional limited liability company is: \_\_\_\_\_
2. The professional LLC is organized for the practice in the profession of: \_\_\_\_\_
3. The address of the initial registered office is: \_\_\_\_\_  
and the name of the initial registered agent is: \_\_\_\_\_
4. Management of the professional limited liability company will be vested in:  
☐ Manager(s)    ☐ Member(s)
5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.

Name

Address

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6. Signature(s) of at least one person responsible for forming the limited liability company:

Signature \_\_\_\_\_

Typed Name \_\_\_\_\_

Capacity \_\_\_\_\_

Signature \_\_\_\_\_

Typed Name \_\_\_\_\_

Capacity \_\_\_\_\_

## INSTRUCTIONS

Optional: If the document is incorrect where can you be reached for corrections? \_\_\_\_\_

Note: Complete and submit the application in duplicate. Articles of Organization **MUST** be filed on the form prescribed by the Secretary of State's Office. \*\*\*Note: Pursuant to Idaho Code §53-615, only a group of individuals duly licensed may organize a professional limited liability company.

1. Line 1 - Enter the name of the professional limited liability company. Pursuant to Idaho Code § 53-602, the name of the professional limited liability company must end with the words Professional Company or the abbreviation P.L.L.C. or PLLC. It is advised that you contact the Secretary of State to check for name availability before filing.
2. Line 2 - Enter the purpose for which the limited liability company is organized. You may only use this form if you render services under the practices of architecture, chiropractic, dentistry, engineering, landscape architecture, law, medicine, nursing, occupational therapy, optometry, physical therapy, podiatry, professional geology, psychology, certified or licensed public accountancy, social work, surveying, veterinary medicine and no others. If you do not render such services you will need to use the Articles of Organization form for a general limited liability company.
3. Line 3 - Enter the name and street address of the registered agent of the professional limited liability company. A registered agent is the person designated to receive service of process upon litigation. This person must be located in Idaho at a street address.
4. Line 4 - Is the management of the professional limited liability company vested in managers or members? Mark the appropriate box. [**Note:** If you mark the member box, management is vested in the members until a formal amendment is filed. If you mark the manager box, management is vested in the managers, even though there may also be members.] It is advised you contact an attorney for any legal opinions.
5. Line 5 - If the management is vested in members list the name and address of at least 1 member. If the management is vested in managers list the name and address of at least 1 manager.
6. Line 6 - The articles of organization must be signed by a manager, if the company will be vested in managers, by a member, if management will be vested in members, or by an organizer. Please identify the name of the signer by typing his/her name below the signature.
7. Enclose the appropriate fee:
  - a. If the application is typed and there are no attachments, the fee is \$100.00.
  - b. If the application is not typed or if it has attached pages, the fee is \$120.00.
  - c. If expedited service is requested, add \$20.00 to the filing fee.
  - d. If the fees are to be paid from the filing party's pre-paid customer account, conspicuously indicate the customer account number in the cover letter or transmittal document.Pursuant to Idaho Code § 67-910(6), the Secretary of State's Office may delete a business entity filing from our database if payment for the filing is not completed.
8. Mail or deliver to:

Office of the Secretary of State  
700 West Jefferson  
PO Box 83720  
Boise ID 83720-0080
9. If you have questions or need help, call the Secretary of State's office at (208) 334-2301.